

Kansas 4-H Evaluation Release

1. I give permission for my child to complete evaluations that will be used to determine program effectiveness or to promote the program.
2. I understand that participation in program evaluations is voluntary and that my child may choose not to participate and may withdraw from evaluations without impact on my or my child's eligibility to participate in the 4-H program.
3. I understand that my child may be asked for consent before completing an evaluation.

I am willing to, or give permission for my child to participate in any program evaluation.

I Agree.

I Do Not Agree.

Member Signature _____ Date _____

Parent/Guardian Signature _____ Date _____